

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

 PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Put Alaska First	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00544346 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Waterfront Strategies			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 04 / 24 / 2014</div> </div>	
Mailing Address 3050 K St NW Ste 100			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">142630.03</div>	
City Washington	State DC	Zip Code 20007-5108	Transaction ID : VNGY99S5C46 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 04 / 24 / 2014</div> </div>	
Purpose of Expenditure Media Schedule, TV		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate Dan Sullivan			<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK </div> </div>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Waterfront Strategies			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 04 / 24 / 2014</div> </div>	
Mailing Address 3050 K St NW Ste 100			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">28961.76</div>	
City Washington	State DC	Zip Code 20007-5108	Transaction ID : VNGY99S5C54 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 04 / 24 / 2014</div> </div>	
Purpose of Expenditure Online advertising		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate Mark Begich			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK </div> </div>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">171591.79</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jim Lottsfeldt

[Electronically Filed]

Date

MM / DD / YYYY
04 / 25 / 2014

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Put Alaska First

FEC IDENTIFICATION NUMBER ▼

C C00544346

Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name of Payee

Waterfront Strategies

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y
04 / 24 / 2014

Mailing Address 3050 K St NW

Ste 100

Amount

20375.72

City

Washington

State

DC

Zip Code

20007-5108

Transaction ID : VNGY99S5C62

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y
04 / 24 / 2014

Purpose of Expenditure

TV Media schedule

Category/
Type

004

Name of Federal Candidate

Mark Begich

☒ Support☐ Oppose

Office Sought:

☐ House

District: 00

☐ President☒ Senate

State: AK

Calendar Year-To-Date
Per Election for Office Sought

995890.48

Disbursement For: 2014

☒ Primary☐ General☐ Other (specify) ▶

Full Name of Payee

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y

Mailing Address

Amount

City

State

Zip Code

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y

Purpose of Expenditure

Category/
Type

Name of Federal Candidate

☐ Support☐ Oppose

Office Sought:

☐ House

District: _____

☐ President☐ Senate

State: _____

Calendar Year-To-Date
Per Election for Office Sought

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

20375.72

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

191967.51

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jim Lottsfeldt

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
04 / 25 / 2014

Signature